

## SPECIAL WASTE PROFILE - CHANGE

| Saveable fill-in form, Restricted printing until all red  I. Generator Information   | quired (yellow) fields are completed. | INITIOL         |                   |
|--|---------------------------------------|-----------------|-------------------|
| This form may be used to request changes to an existing Special Waste Profile.   |                                       |                 |                   |
| Generator Name:  | US EPA Region 6-CES Environmental     |                 |                   |
| Name of Waste:   | Class 1 liquids for solidification    | Waste Profile # | 51121419794       |
| II. Purpose of Change  |                                       |                 |                   |
| Description of Change Requested and Reason for Change: (Provide detailed explanation of why the change is requested following the appropriate checked box below).              |                                       |                 |                   |
| ■ Volume Increase By: 20,000 Is the analysis originally submitted with the Profile representative of the volume Increase? Yes ✓ No If No, complete Section III, below.         |                                       |                 |                   |
| Extend Expiration Date:  |                                       |                 |                   |
| ☐ Change or Add Landfill: ☐ Add Additional Laboratory Reports: Complete Representative Sample Certification, Section III, below.   |                                       |                 |                   |
| Add MSDS:  |                                       |                 |                   |
| Generator Name Change:   |                                       |                 |                   |
| Other:   |                                       |                 |                   |
|  |                                       |                 |                   |
|  |                                       |                 |                   |
|  |                                       |                 |                   |
|  |                                       |                 |                   |
| III. Representative Sample Certification   |                                       |                 | ☐ No Sample Taken |
| Is the representative sample collected to prepare this profile and laboratory analysis, collected in accordance with U.S. EPA 40 CFR 261.20(c) guidelines or equivalent rules? |                                       |                 | ■ YES or □ NO     |
| Type of Sample: ☐ COMPOSITE SAMPLE ■ GRAB SAMPLE   |                                       |                 |                   |
| Sample Date: 12/11/2014  |                                       |                 |                   |
| Sample ID Numbers: FT5180  |                                       |                 |                   |
|  |                                       |                 |                   |
|  |                                       |                 |                   |
|  |                                       |                 |                   |
| IV Conditional or  |                                       |                 |                   |
| IV. Certification  |                                       |                 |                   |
| I hereby certify that the waste and the process generating the waste are unchanged and are accurately represented in the original profile.                                     |                                       |                 |                   |
| Gary Moore-On Scene Co   | oordinator US EPA Region              |                 | /I                |
| Authorized Represer  | ntative Name and Title (Printed)      | Cor             | npany Name        |

Authorized Representative Signature

Date